Submit 3 Copies To Appropriate District Office District I Energy	Energy Minerals and Nativial Becomes	
1625 N. French Dr., Hobbs, NM 88240 District II		WELL API NO. 30-015-27546
1301 W. Grand Ave., Artesia, NM 88210 OIL C	Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION 1220 South St. Francis Dr.	
1000 Rio Brazos Rd , Aztec, NM 87410 District IV	1000 Rio Brazos Rd , Aztec, NM 87410 Sonto Eq. NM 87505	
1220 S. St. Francis Dr., Santa Fc, NM 87505	,	6. State Oil & Gas Lease No. 025503
SUNDRY NOTICES AND R (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL DIFFERENT RESERVOIR. USE "APPLICATION FOR PA	L OR TÒ DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
PROPOSALS.)  1. Type of Well: Oil Well Gas Well		8. Well Number 7
Name of Operator Chesapeake Operating, Inc.		9. OGRID Number
3. Address of Operator P.O. Box 18496	NOV 2 3 2009	147179 10. Pool name or Wildcat
Oklahoma City, OK 73	NMOCD ARTESIA	Shugart-Yates-SR-Q
4. Well Location		
Unit Letter I : 1530 feet from the South line and 940 feet from the East line Section 26 Township 18S Range 30E NMPM County Eddy		
11. Elevation (Show whether DR, RKB, RT. GR, etc.)		
3446.2 GR		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING   TEMPORARILY ABANDON   CHANGE PLANS   COMMENCE DRILLING OPNS   P AND A		
TEMPORARILY ABANDON		
DOWNHOLE COMMINGLE		
OTHER:	OTHER: MIT Cha	
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion		
or recompletion.		
Chesapeake Operating respectfully submits MIT chart. Test was witnessed by Paul Swartz with the BLM. Ran test for 30 minutes @		
600psi. Good test		
	•	
Spud Date:	Rig Release Date:	
<u> </u>		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE PAL SICHAR DO	TITLE_Production Assistant	DATE_11/16/2009 .
Type or print name Pat Richards	E-mail address: pat.richards@chk	.com PHONE: (575)391-1462
For State Use Only	ccepted for record	1101.01 (0,0)01.1102
7.		
APPROVED BY:	NMOCD CE	DATE 12/11/09